



# POLICIES BEHIND MY VAGINA: RECONSTRUCTING THE IDEA OF WOMEN'S HEALTHCARE

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Institute for Women's Leadership

The Leadership Scholars Certificate Program is a two-year selective, interdisciplinary certificate program that prepares Rutgers undergraduate women to be informed, innovative, and socially responsible leaders.

Leadership Scholars design and implement social action projects to expand their understanding of issues and problems and to develop leadership skills.

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## Mission Statement

- The concept of abortion has led to the misconception that women's healthcare only means abortion, which is false. My social action project is intended to raise awareness of the misconception of reproductive rights, educate students on the importance of protecting women's access to healthcare, and to empower them to use their voices to advocate for change.

### Policies Impacting Reproductive Rights

- Affordable Care Act
- Title X Family Planning
- Gag Rule
- State Legislations



### *Who does it impact?*

- Low-income women
- Uninsured women
- Marginalized women

### *Activities and Methods*

- Video interview
- Clips of reproductive rights marches/speakers



## *Project Description*

I have decided to do a video presentation that discuss women's healthcare, the issues that surround it, and ways to improve it. The video would start with various clips of marches and brief images advocating for women's reproductive health. After that I will introduce the topic and will explain why I chose the issue and why it is important. Next there will be two interviews one from Professor Marci Berger and another from Professor Cynthia Daniels. Each of them highlights their perspective on the issue of reproductive healthcare by answering several questions. Professor Berger teaches Health and Public Policy as well as Sexual and Reproductive Health, she brings in an economic perspective of the issue. Professor Daniels works for the Eagleton Institute of Politics. She has knowledge on the impact of abortion and professional misinforming women on family planning and contraceptive measures. Both perspectives are valuable to the conversation. I also have a presentation by Planned Parenthood that teaches the importance of reproductive health, Title X gag rule, and the resources available to women looking for reproductive care. At the end I will close out the video presentation with important questions that I want the viewers to think about.





## *Questions Asked*

- Why do you think reproductive policies are controversial?
- How do restriction policies impact uninsured, low-income, and marginalized women?
- Explain the impact restrictive reproductive healthcare laws have on women of color; education attainment, job/career outcome, poverty, labor- force participation
- Do you think that there is an extent to which policies can go when debating women's rights?
- Why does it help promote women's reproductive care?
- What is your point of view on the ACA's impact on women's reproductive healthcare?
- Why do you think women's reproductive care is often associated with abortion, and how does this harm the overall accessibility of reproductive care?
- Do you believe that states should establish their own family planning services and reproductive policies? If so why?
- What is your take on the current Reproductive freedom Act that is in the NJ legislature?
- What are different ways that youth can get involved to help advocate for reproductive rights?

## *What is the GAG Rule and Title X*

### *Why It Matters*

*Title X protects women's access to healthcare*

- The Trump-Pence administration implemented a gag rule that dismantles Title X — which is the federal program that gives grants to health care providers for free and low-cost birth control, contraception education, STD tests, breast and cervical cancer screenings, and other preventive reproductive care
  - The gag rule also takes grants away from health centers that separately provide abortion — like Planned Parenthood.

### 3 Things the Gag Rule Does



Prevent patients from getting full and accurate information about contraceptives and abortion

“Gag” health care providers in the Title X: by making it illegal for them to tell their patients how and where they can access abortion safely and legally. healthcare Program

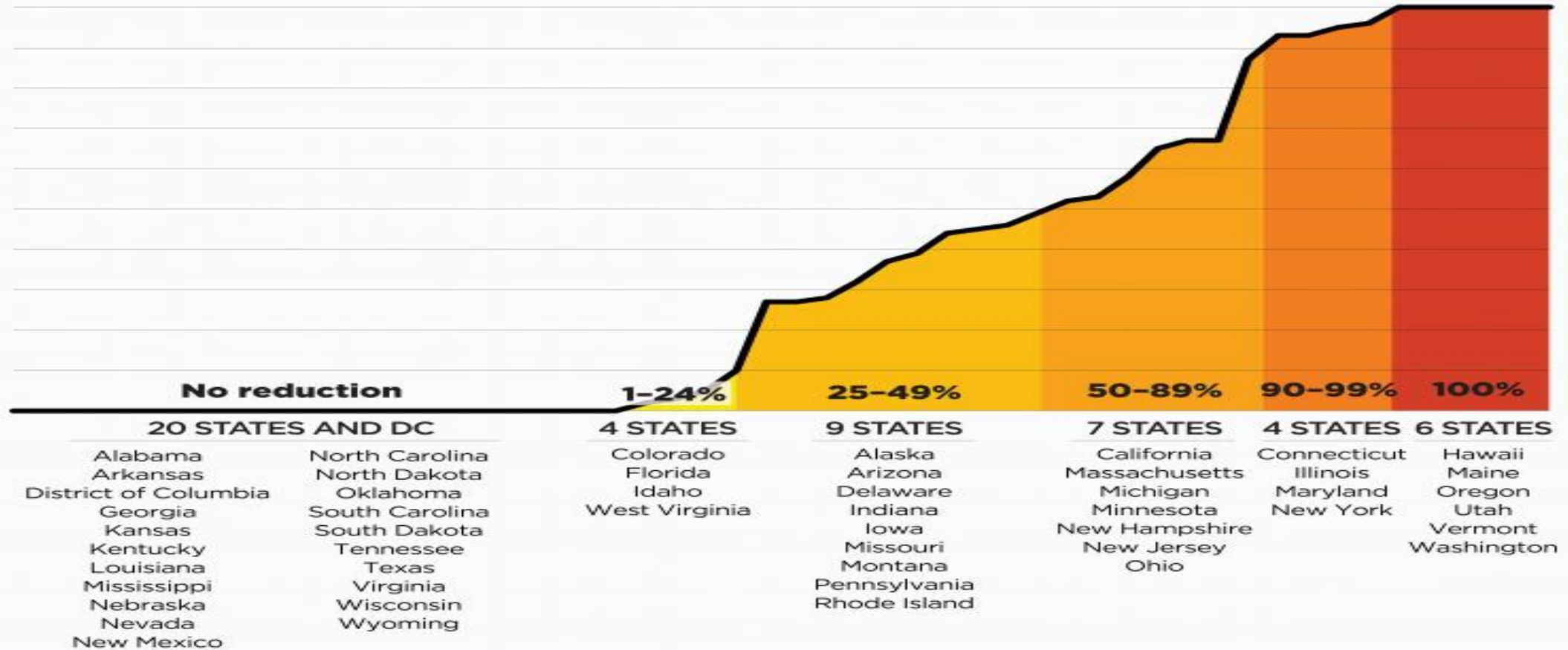
Add new restrictions specifically designed to block patients from getting preventative care from Planned Parenthood

4 million women

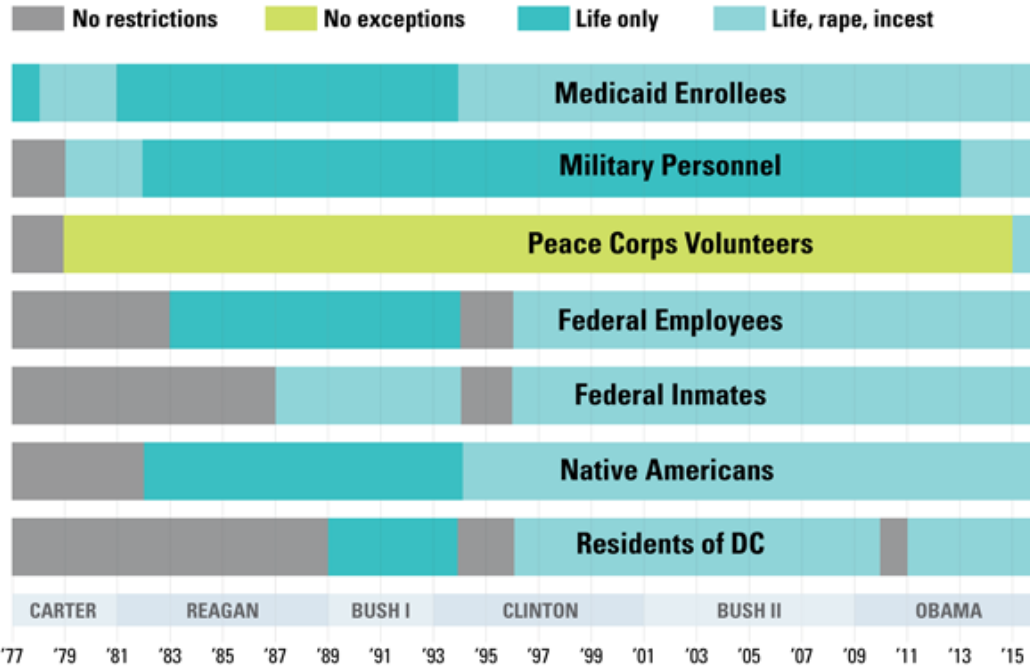


**The domestic gag rule has reduced the Title X network's capacity by 46% nationwide, and by much more in many states, affecting potentially 1.6 million female contraceptive patients**

% reduction in capacity



# The federal government has long interfered with abortion access for many U.S. women



Note: Segments are fiscal years not calendar years

guttmacher.org

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Abortion is a procedure intended to end a pregnancy if it risk the lives of the mother or the infant, if the pregnancy occurred due to a harmful event and in many is the last choice for a women who is not financially or mentally prepared. Funding to sites, clinics, or agencies provides a safe space for women to explore this option, and if it was taken away, it can increase unsafe practices, putting women at a higher mortality rate.

<https://www.guttmacher.org/infographic/2016/federal-government-has-long-interfered-abortion-access-many-us-women>



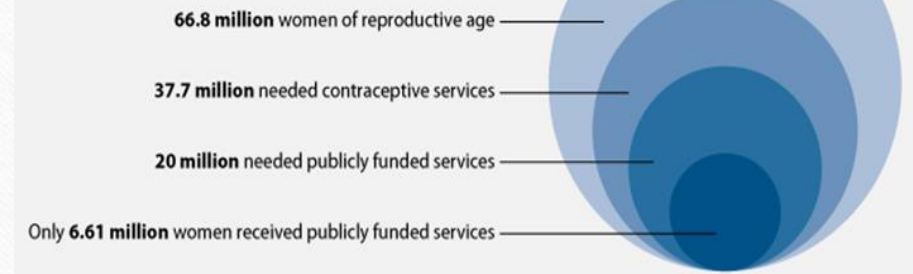
## Statistics on the impact of Reproductive Restrictions

- “The average cost of a year’s supply of birth control pills is equivalent of 51 hours of work for a woman making the federal minimum wage” and “the estimated cost for uninsured women, cost of pills over a year(\$370) which constitutes 68 percent of their annual out-of-pocket expenditures for healthcare services”(Institute for Women’s Policy Research)
- “Contraceptives use averted approximately 44% of maternal deaths” and “reduces the number of high-risk and high-parity births, thereby reducing maternal mortality”. (Maternal Health Task Force)

The creation of contraceptives is not only meant to prevent pregnancies but provide multiple options to different women experiencing different health issues

FIGURE 1

In 2012, only 31 percent of low-income women could access publicly funded family planning



Source: Jennifer J. Frost, Mia R. Zolna, and Lori Frohwith, “Contraceptive Needs and Services, 2012 Update” (New York: Guttmacher Institute, 2014), available at <http://www.guttmacher.org/pubs/win/contraceptive-needs-2012.pdf>.

- The ability for women to determine family size, timing, and spacing of their children can reduce infant mortality rate, improved maternal health, and economic conditions. Women’s access to healthcare is extremely important because it is not a burden, but a solution that can benefit both women and states. Without a concrete reform to combat the restrictions by the federal government, women will continue to be denied access, their health status would be at risk, and their ability to have a strong financial future would be difficult

## Economic Impacts

### *State/ Federal Government*

- “Every \$1 spent on preventing unintended pregnancy reduces the cost of pregnancy related care by \$2.20” and “the annual cost of treating major complications from unsafe abortion by \$553 million.” (Amnesty International)
- “New Jersey was able to save over \$275,766,000 in family planning services. Imagine what the number would be now that they have taken full responsibility for women’s healthcare
- “Illinois saved \$59 million, Arkansas saved \$75 million, and California saved \$2 billion over 5 years (National Health Law 2019).

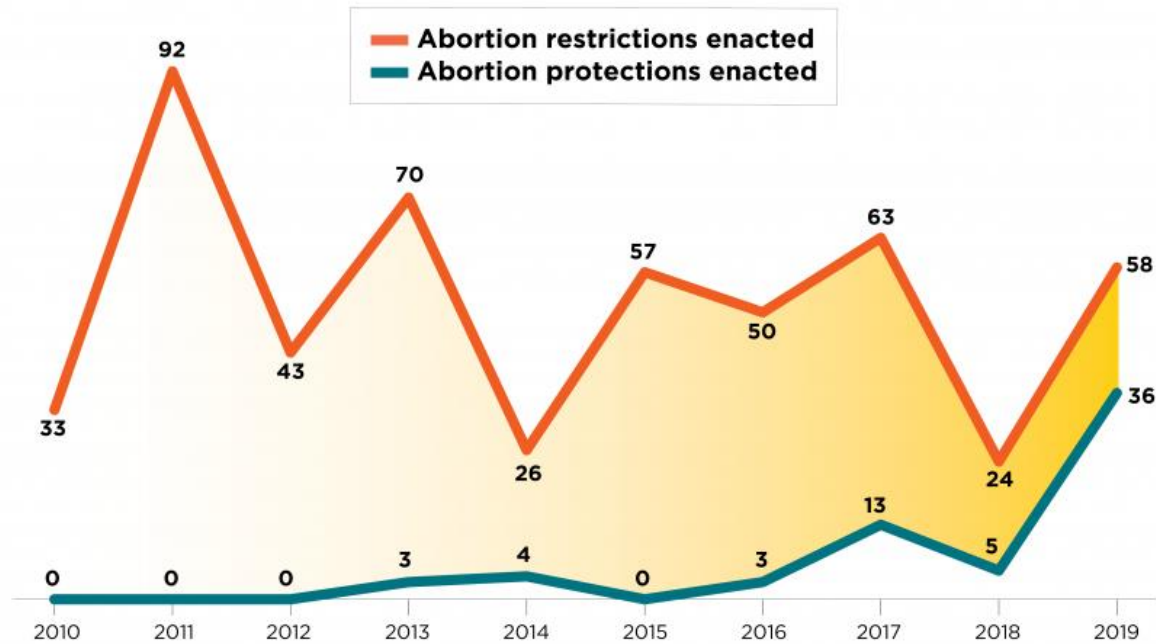


### *Women*

- Women’s access to the pill improved higher education rates
- Legalization of contraception allows women to seek longer educational career
- Women are more likely to have an increase in career possibility due to access to contraceptives
- Having access to contraception reduces the probability that a woman is in poverty



## In 2019, U.S. state policies enacted to restrict abortion outweighed policies to protect it, but the gap has narrowed greatly



[gu.tt/StatePolicyTrends2019](https://www.guttmacher.org/gu.tt/StatePolicyTrends2019)

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## Importance of State Policies

- Policies will provide family planning services like Planned Parenthood, with the budget needed to ensure access to high quality reproductive health resources
- The continuation of sharing accurate health care information, and other health care services.
- Enable providers to keep their doors open and deliver care in a comprehensive, patient-centered manner.
- Provides more access to reproductive health through the state's Medicaid program, which covers abortion care, contraceptives, family planning services, and prenatal care (McNeese 2018).

- *NJ 9.7 Family planning Budget*
- *Reproductive Freedom Act Legislation*

## *Feminist Leadership*

Advocating for women's reproductive healthcare is not a matter of pro-choice or pro-life. It is the matter of allowing women to have full control over their bodies and their ability to start a family when they choose. Resources should be available to them to better their health and future outcomes. Reproductive rights is women's rights and human rights! Policies restricting their access should have no merit over women's personal choices. This project represents feminist leadership by outlining the misconception of abortion and starting a conversation that can inform others on the importance of understanding what reproductive healthcare truly is.





## *Lessoned Learned*

- I have learned that facts are always altered by beliefs (religious) which untimely limits the rights women have over their own bodies.
- “Economic savings” has also been a justifiable means to end abortion and restrict women's healthcare despite facts proving otherwise
- Professor Daniels “Informed Consent” project provides facilities with accurate information regarding women’s health (abortion and contraceptive)

## *Impact of this Project*

- My project will continue the conversation and inform individuals on what women’s healthcare truly is
- My project will impact the way people view abortion and women’s healthcare
- Any future scholars looking to continue the conversation of women’s healthcare can use my findings and my project as inspiration



# Bibliography

“Abortion+Contraception Save Lives - What's More Essential than That?” Amnesty International, [www.amnesty.org/en/latest/news/2020/04/abortion-contraception-essential/](http://www.amnesty.org/en/latest/news/2020/04/abortion-contraception-essential/).

“Bad Medicine: How a Political Agenda is Undermining Women’s Healthcare.” (2016). National Partnership for Women & Families, 2nd Edition.

Bernstein, Anna, and Kelly Jones. “The Economic Effects Of Contraceptive Access: A Review of the Evidence .” Institute For Women's Policy Research, 26 Sept. 2019, [iwpr.org/wp-content/uploads/2019/09/B381\\_Contraception-Access\\_Final.pdf](http://iwpr.org/wp-content/uploads/2019/09/B381_Contraception-Access_Final.pdf).

Cruse, Lindsey Reuchlin, and Justine Augeri . “Reproductive Health and Women’s Educational Attainment. Women’s Funds Strategies to Improve Outcomes for Women.” Institute For Women's Policy Research, 7 Oct. 2015, [iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/R465-WFN%20Women's%20Reproductive%20Health%20Status%2010.23.2015.pdf](http://iwpr.org/wp-content/uploads/wpallimport/files/iwpr-export/publications/R465-WFN%20Women's%20Reproductive%20Health%20Status%2010.23.2015.pdf).

“Characteristics of U.S. Abortion Patients, 2008.” Guttmacher Institute, 15 Mar. 2016, [www.guttmacher.org/report/characteristics-us-abortion-patients-2008](http://www.guttmacher.org/report/characteristics-us-abortion-patients-2008).  
The Guttmacher provides factual data and analysis on the current issues facing women’s healthcare. I decided to use this article because it have strong statistics about abortion and why women with different social class, race or ethnicity, use it.

Dfitzgerald. “Fact Sheet: Medicaid Family Planning Services Save Money.” National Health Law Program, 24 Oct. 2018, [healthlaw.org/resource/fact-sheet-medicaid-family-planning-services-save-money/](http://healthlaw.org/resource/fact-sheet-medicaid-family-planning-services-save-money/).



Esenstad, Donna Barry and Amelia. "Ensuring Access to Family Planning Services for All." Center for American Progress.

This article outlines the importance of family planning. It provides an in-depth analysis of the statistics that were taken to see how effective preventive care is and who is impacted the most. It also provides more information on Title X, Medicaid, and disparities within access.

McNeese, Jazmyne. "Defending Reproductive Rights in New Jersey by Improving Access to Health Care for All." New Jersey Policy Perspective, 10 Dec. 2018, [www.njpp.org/healthcare/defending-reproductive-rights-in-new-jersey-by-improving-access-to-health-care-for-all](http://www.njpp.org/healthcare/defending-reproductive-rights-in-new-jersey-by-improving-access-to-health-care-for-all)

"Official Site of The State of New Jersey." Office of the Governor | Governor Murphy Signs Legislation Appropriating \$9.5 Million for Family Planning Services, [www.nj.gov/governor/news/news/562019/approved/20200102a.shtml](http://www.nj.gov/governor/news/news/562019/approved/20200102a.shtml).

Reproductive Health, et al. "Family Planning and Maternal Health." Maternal Health Task Force, 9 Jan. 2018, [www.mhtf.org/topics/family-planning-maternal-health/](http://www.mhtf.org/topics/family-planning-maternal-health/).

"State Facts on Publicly Funded Family Planning Services: New Jersey." Guttmacher Institute, 2016, [www.guttmacher.org/sites/default/files/factsheet/fp-nj.pdf](http://www.guttmacher.org/sites/default/files/factsheet/fp-nj.pdf).

"Title X and Trump's Domestic Gag Rule." PopConnect, 13 Sept. 2019, [www.populationconnection.org/title-x-trump-domestic-gag-rule/](http://www.populationconnection.org/title-x-trump-domestic-gag-rule/).

<https://www.istandwithpp.org/no-gag-rule>





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